Case 17-09821 Doc 1 Filed 03/29/17 Entered 03/29/17 08:05:15 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Eric First name M. Middle name Schickel	First name Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7656	

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Debtor 1 Eric M. Schickel

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		4706 N. Beacon St., Apt. 309 Chicago, IL 60640				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Tell the Court About Your Bankruptcy Case

■ Chapter 7

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(Form 2010)). Also, go to the top of page 1 and check the appropriate box.

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Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy

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Debtor 1 Eric M. Schickel

The chapter of the

Bankruptcy Code you are

choosing to file under

Part 2:

Document Page 3 of 55 Case number (if known)

		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee	abo ord a p	out how your ler. If your pre-printed	ou may pay. Typica r attorney is submitt I address.	lly, if you are paying the fee you ing your payment on your beha	with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, lf, your attorney may pay with a credit card or c	or money check with
				y the fee in install ee in Installments (0		n, sign and attach the Application for Individual	s to Pay
		bu ⁻	t is not red plies to yo	quired to, waive you our family size and y	r fee, and may do so only if you ou are unable to pay the fee in	only if you are filing for Chapter 7. By law, a ju ir income is less than 150% of the official pove installments). If you choose this option, you ma al Form 103B) and file it with your petition.	rty line that
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No.	Go to	line 12.			
	residence?	Yes.	Has y	our landlord obtaine	ed an eviction judgment against	you and do you want to stay in your residence	?
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> bankruptcy petitio		udgment Against You (Form 101A) and file it w	ith this

Voluntary Petition for Individuals Filing for Bankruptcy

Debtor 1 Eric M. Schickel

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Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	e & ZIP Code				
	it to this petition.		Checi	Check the appropriate box to describe your business:				
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
			Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemerations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the product U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
For example, do you own perishable goods, or				s the property?	Number, Street, City, State & Zip Code			

Debtor 1 Eric M. Schickel Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Ef

5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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16.	What kind of debts do	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an							
	you have?		individual primarily for a personal, family, or household purpose."							
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.		usiness debts? Business debts are debts estment or through the operation of the bus						
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.	☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or busines	ss debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt propvailable to distribute to unsecured creditors	perty is excluded and administrative expenses ?					
	administrative expenses		■ No							
	are paid that funds will be available for distribution to unsecured creditors?		Yes							
18.	How many Creditors do you estimate that you	■ 1-49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000					
	owe?	☐ 50-99		☐ 10,001-25,000	☐ More than100,000					
		□ 200-9	99							
19.	How much do you	\$0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion					
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion					
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion					
20.	How much do you estimate your liabilities	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion					
	to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10.000.000.001 - \$50 billion					
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion					
Part	:7: Sign Below									
	you	I have ex	camined this petition, and I de	clare under penalty of perjury that the inform	mation provided is true and correct.					
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I ch						
	ot an attorney to help me fill out this									
		I reques	relief in accordance with the	chapter of title 11, United States Code, spe	ecified in this petition.					
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 7 and 571.										
		Eric M.	M. Schickel Schickel e of Debtor 1	Signature of Debto	or 2					
		Execute	d on March 29, 2017	Executed on						
			MM / DD / YYYY	MM	I / DD / YYYY					

Debtor 1 Eric M. Schickel Page 7 of 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	March 29, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

3/29/17 8:02AM

Desc Main Case 17-09821 Doc 1 Filed 03/29/17 Entered 03/29/17 08:05:15

Page 8 of 55 Document Fill in this information to identify your case: Eric M. Schickel First Name Middle Name Last Name

Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

amended filing

Official Form 106Sum

Debtor 1

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,600.00
Par	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	288.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	78,345.00
	Your total liabilities	\$	78,633.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,471.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,254.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sch	edules.
	■ Yes		

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Debtor 1 Eric M. Schickel Document Page 9 of 55
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	288.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	19,712.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	20,000.00

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Fill in this infor	mation to ident	tify your case an	DOCUME and this filing:	eni Pa	ue 10 01 55)				
Debtor 1	Eric M. Sc	hickel								
	First Name		Middle Name	Last	Name					
Debtor 2 (Spouse, if filing)	First Name	N	Middle Name	Last	Name					
United States Ba	ankruptcy Court	for the: NORTH	HERN DISTRICT	OF ILLINOIS						
	, ,							_		
Case number _										if this is an ed filing
Official Fo	orm 106A	<u>/B</u>								
Schedul	le A/B: I	Property	7							12/15
hink it fits best. E	Be as complete ar	nd accurate as pos	List an asset only o ssible. If two marrie ite sheet to this for	ed people are f	iling together, bot	th are equally re	sponsible f	or supply	ing correc	ct
		Duilding Land a	or Other Beel Fetet	- V O I	Java an Interest le	_				
		-	or Other Real Estate							
. Do you own or	have any legal or	r equitable interest	t in any residence, l	building, land,	or similar proper	ty?				
No. Go to Pa										
☐ Yes. Where	is the property?									
Part 2: Describe	Your Vehicles									
			nterest in any vel eport it on Schedu					ny vehicl	es you o	wn that
B. Cars, vans, tr	rucks, tractors,	sport utility veh	nicles, motorcycle	es						
■ No										
☐ Yes										
			d other recreation ercraft, fishing ves				ies			
■ No										
☐ Yes										
							_			
			n for all of your ei hat number here.							\$0.00
Part 3: Describe	Your Personal a	nd Household Iter	ms							
			erest in any of the	e following it	ems?			port i Do n	ent value on you o ot deduct as or exe	own? t secured
6. Household go Examples: Ma	oods and furnis ajor appliances,	shings furniture, linens,	china, kitchenwar	re						
Yes. Desc	cribe									
	Но	ousehold Good	ds & Furniture							\$500.00
	-			-						

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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	TV & Electronics	\$400.00
	17 d Licotromos	
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; state other collections, memorabilia, collectibles ■ No □ Yes. Describe	mp, coin, or baseball card collections;
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; musical instruments	canoes and kayaks; carpentry tools;
	■ No □ Yes. Describe	
10	 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No □ Yes. Describe 	
11	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No 	
	Yes. Describe	
	Normal Clothing	\$600.00
	 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches ■ No □ Yes. Describe Non-farm animals Examples: Dogs, cats, birds, horses 	s, gems, gold, silver
	■ No □ Yes. Describe	
14	 Any other personal and household items you did not already list, including any health aids you did n ■ No □ Yes. Give specific information 	ot list
1	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attaction for Part 3. Write that number here	\$1,500.00
	art 4: Describe Your Financial Assets	
D	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file y No Yes	our petition
17	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brown institutions. If you have multiple accounts with the same institution, list each.	okerage houses, and other similar
	□ No ■ YesInstitution name:	

Debtor 1

8

9

Eric M. Schickel

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		47.4	Chaakina		Checking Account USAA FSB	\$100.00
		17.1.	Checking		USAA I SB	φ100.00
18	Bonds, mutual funds, o Examples: Bond funds, i				ge firms, money market accounts	
	■ No □ Yes		Institution or issu	er name:		
19	joint venture	ock and	interests in inco	rporated	and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No □ Yes. Give specific info		about them ne of entity:		% of ownership:	
20	Negotiable instruments i	nclude p	ersonal checks, o	cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	☐ Yes. Give specific infor		about them uer name:			
21	■ No	RA, ERIS	SA, Keogh, 401(k)), 403(b),	thrift savings accounts, or other pension or profit-sharing plan	ns
	☐ Yes. List each account		ely. of account:		Institution name:	
22	Examples: Agreements	l deposit	s you have made		ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others
	■ No □ Yes				Institution name or individual:	
23		a period	dic payment of mo	oney to y	ou, either for life or for a number of years)	
	■ No □ Yeslss	uer nam	e and description			
24	26 U.S.C. §§ 530(b)(1), 5			a qualifie	ed ABLE program, or under a qualified state tuition progra	m.
	■ No □ Yes Ins	titution n	name and descrip	tion. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
25	■ No			(other tl	han anything listed in line 1), and rights or powers exercis	sable for your benefit
	☐ Yes. Give specific info					
26	 Patents, copyrights, tra Examples: Internet doma ■ No 				er intellectual property m royalties and licensing agreements	
	☐ Yes. Give specific info	rmation	about them			
27	Licenses, franchises, a Examples: Building pern■ No				e association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific info	rmation	about them			
M	oney or property owed to	you?				Current value of the portion you own? Do not deduct secured

claims or exemptions.

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Case number (if known) Document

	Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years					
	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property s No ☐ Yes. Give specific information	settlement				
	 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No 					
	☐ Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	ce				
	■ No					
	Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:				
	 Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No 					
	Yes. Give specific information					
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No					
	☐ Yes. Describe each claim					
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to see No	set off claims				
	Yes. Describe each claim					
35.	Any financial assets you did not already list ■ No □ Yes. Give specific information					
36	5. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$100.00				
Pa	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.					
١	Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.					
I	☐ Yes. Go to line 38.					
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.					
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.					
Pa	Describe All Property You Own or Have an Interest in That You Did Not List Above					

Debtor 1

Eric M. Schickel

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53.	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?				
	■ No					
_	Yes. Give specific information					
54.	Add the dollar value of all of your entries from Part 7. Writ	e that	number here			\$0.00
Part	t 8: List the Totals of Each Part of this Form			-		
55.	Part 1: Total real estate, line 2					\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		-	
57.	Part 3: Total personal and household items, line 15	_	\$1,500.00			
58.	Part 4: Total financial assets, line 36	_	\$100.00			
59.	Part 5: Total business-related property, line 45	_	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	_	\$0.00			
61.	Part 7: Total other property not listed, line 54	+	\$0.00			
62.	Total personal property. Add lines 56 through 61	_	\$1,600.00	Copy personal property to	otal .	\$1,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62					\$1,600.00

Official Form 106A/B Schedule A/B: Property page 5

	Case 17-09821 D0	C 1 Filed 03/29/1 Document		Page 15 of 55	ט פנ.נ	3/29/17 8:02AM
Fil	I in this information to identify your cas			AUE IS OF SS		
De	ebtor 1 Eric M. Schickel					
_	First Name	Middle Name	L	ast Name		
	ebtor 2 house if, filing) First Name	Middle Name	L	ast Name		
Un	nited States Bankruptcy Court for the: N	ORTHERN DISTRICT OF	ILLIN	OIS		
റം	ase number					
	cnown)					Check if this is an
						amended filing
Oí	fficial Form 106C					
	chedule C: The Prop	erty You Cla	im	as Exempt		4/16
the nee cas For spe any	as complete and accurate as possible. If to property you listed on <i>Schedule A/B: Prope</i> eded, fill out and attach to this page as mare number (if known). The each item of property you claim as executific dollar amount as exempt. Alternaty applicable statutory limit. Some exempt.	perty (Official Form 106A/B) by copies of Part 2: Addition ampt, you must specify the ively, you may claim the fortions—such as those for	as yo nal Pa e amo full fai	our source, list the property that you age as necessary. On the top of any bunt of the exemption you claim. It market value of the property be th aids, rights to receive certain be	claim as ex additional p One way of ing exempt enefits, and	empt. If more space is pages, write your name and f doing so is to state a ted up to the amount of d tax-exempt retirement
exe	ds—may be unlimited in dollar amount. Emption to a particular dollar amount an the applicable statutory amount.					
Pa	It 1: Identify the Property You Claim	as Exempt				
1.	Which set of exemptions are you claim	ning? Check one only, eve	n if yo	our spouse is filing with you.		
	■ You are claiming state and federal nor	nbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are claiming federal exemptions.	11 U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule	A/B that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line or					ws that allow exemption
	Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Household Goods & Furniture	\$500.00		\$500.00	735 ILC	S 5/12-1001(b)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	TV & Electronics	\$400.00		\$400.00	735 ILC	S 5/12-1001(b)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
	Normal Clothing	\$600.00		\$600.00	735 ILC	S 5/12-1001(a)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Checking Account USAA FSB	\$100.00		\$100.00	735 ILC	S 5/12-1001(b)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exempt (Subject to adjustment on 4/01/19 and ev No ☐ Yes. Did you acquire the property co	very 3 years after that for ca	ises fi	,	,	

No

Official Form 106C

Yes

Page 16 of 55 Case number (if known) Debtor 1 Eric M. Schickel

Fill in this information to identify your case:					
Debtor 1	Eric M. Schickel				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Cas	e 17-09821 DC	Docume		18 of 5	729/17 08.05. 55	15 Desc	3/29/17 8:02AN
Fill ir	this informa	ation to identify your ca	se:					
Debto	or 1	Eric M. Schickel						
		First Name	Middle Name	Last Nam)			
Debto		First Name	Marada Nasas	Last Name				
(Spous	e if, filing)	First Name	Middle Name	Last Nam	•			
Unite	d States Banl	cruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case	number							
(if knov							☐ Che	eck if this is an
							ame	ended filing
Ott:	.:al	400F/F						
	cial Form		a Hava Haaaa		_			40/45
		F: Creditors Whaccurate as possible. Use						12/15
Part 1. D		of Your PRIORITY Unse						
	Yes.							
id po	entify what type ossible, list the	priority unsecured claims. e of claim it is. If a claim has claims in alphabetical order a an one creditor holds a parti	both priority and nonpriority according to the creditor's n	amounts, list that o ame. If you have m	laim here a	nd show both priority a	nd nonpriority am	ounts. As much as
(F	or an explanati	on of each type of claim, see	the instructions for this for	m in the instruction	booklet.)	Total claim	Priority amount	Nonpriority amount
		unty Department of			2000	¢200 00	\$0.	.00 \$288.00
2.1	Revenue Priority Cred		Last 4 digits of	account number	3909	\$288.00	Ψ υ.	<u> </u>
		ailer Use Tax	When was the	debt incurred?	02/17 - 0	03/17		
		twork Place					•	
		IL 60673-1263 eet City State Zlp Code	As of the date t	ou file, the claim	is: Check a	II that apply		
,		the debt? Check one.	☐ Contingent	,ou me, me ciami	is. Officer a	ш шасарру		
	■ Debtor 1 on	lv	☐ Unliquidated					
	Debtor 2 on	,	☐ Disputed					
				ITY unsecured cla	im:			
		d Debtor 2 only		pport obligations				
		of the debtors and another		-				
		s claim is for a community		ertain other debts y		government u were intoxicated		
	is the claim su ■ No	bject to offset?			ury wrille yo	u were intoxicated		
	— INO		Other. Speci	ту				

☐ Yes

Non-retailer use tax

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Debtor 1 Eric M. Schickel				
.2 Marla O'Brien Priority Creditor's Name Unknown	Last 4 digits of account number When was the debt incurred?	\$0.00	\$0.00	\$0.0
Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply		
Who incurred the debt? Check one.	☐ Contingent	,		
Debtor 1 only	☐ Unliquidated			
☐ Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	■ Domestic support obligations			
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Taxes and certain other debts you ☐ Claims for death or personal injury	· ·		
■ No	Other. Specify			
☐ Yes	Backed Child	Support		
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☐ Yes.	-	edules.		
 No. You have nothing to report in this part. Submit	this form to the court with your other sche alphabetical order of the creditor who laim. For each claim listed, identify what t	b holds each claim. If a creditor has type of claim it is. Do not list claims a	Iready included in Pa	rt 1. If more
 ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl 	this form to the court with your other sche alphabetical order of the creditor who laim. For each claim listed, identify what t	b holds each claim. If a creditor has type of claim it is. Do not list claims a	Iready included in Pa	rt 1. If more in Page of
■ No. You have nothing to report in this part. Submit a Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.	this form to the court with your other sche alphabetical order of the creditor who laim. For each claim listed, identify what t	b holds each claim. If a creditor has type of claim it is. Do not list claims a	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047	alphabetical order of the creditor who aim. For each claim listed, identify what to creditors in Part 3.If you have more than	o holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims to	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
■ No. You have nothing to report in this part. Submit to Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name	alphabetical order of the creditor who aim. For each claim listed, identify what to creditors in Part 3.lf you have more than Last 4 digits of account number	b holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims to the second	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
■ No. You have nothing to report in this part. Submit 1 ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106	alphabetical order of the creditor who aim. For each claim listed, identify what it creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred?	b holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims to the second	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. 1 AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code	alphabetical order of the creditor who aim. For each claim listed, identify what it creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred?	b holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims to the second	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. 1 AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one.	alphabetical order of the creditor who aim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is	b holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims to the second	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only	alphabetical order of the creditor who aim. For each claim listed, identify what it creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed	b holds each claim. If a creditor has type of claim it is. Do not list claims at three nonpriority unsecured claims it. 8PA0 03/06 - 03/17 is: Check all that apply	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
No. You have nothing to report in this part. Submitted Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	alphabetical order of the creditor who aim. For each claim listed, identify what is creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated	b holds each claim. If a creditor has type of claim it is. Do not list claims at three nonpriority unsecured claims it. 8PA0 03/06 - 03/17 is: Check all that apply	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	alphabetical order of the creditor who aim. For each claim listed, identify what it creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed	b holds each claim. If a creditor has type of claim it is. Do not list claims at three nonpriority unsecured claims it. 8PA0 03/06 - 03/17 is: Check all that apply	Ilready included in Pa fill out the Continuatio	rt 1. If more on Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	alphabetical order of the creditor who aim. For each claim listed, identify what is creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims	b holds each claim. If a creditor has type of claim it is. Do not list claims at three nonpriority unsecured claims it. 8PA0 03/06 - 03/17 is: Check all that apply d claim:	Ilready included in Pa fill out the Continuation Total clai	rt 1. If more on Page of
No. You have nothing to report in this part. Submitted Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2. AES/FRN SLT Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	alphabetical order of the creditor who aim. For each claim listed, identify what i creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separation.	b holds each claim. If a creditor has type of claim it is. Do not list claims at three nonpriority unsecured claims it. 8PA0 03/06 - 03/17 is: Check all that apply d claim:	Ilready included in Pa fill out the Continuation Total clai	rt 1. If more in Page of

Debtor 1 Eric M. Schickel

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Case n

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Case number (if know)

4.2	Cap One	Last 4 digits of account number	0847	\$3,453.00			
	Nonpriority Creditor's Name Bankruptcy Dept. PO Box 30285	When was the debt incurred?	09/14 - 03/17				
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Judgment					
4.3	Capital One	Last 4 digits of account number	1595	\$3,635.00			
	Nonpriority Creditor's Name Bankruptcy Dept.	When was the debt incurred?	09/14 - 03/17				
	PO Box 30281						
	Salt Lake City, UT 84130-0281 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.	,	,				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Judgment					
1.4	Cash Flow Group	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name 12333 NW 18th St. #3 Pembroke Pines, FL 33026	When was the debt incurred?	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	= :				
	☐ Yes	Other. Specify NOTICE ON	NLY				

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4.5	Credit One	Last 4 digits of account number	\$828.00			
	Nonpriority Creditor's Name Bankrupcty Department PO Box 98873	When was the debt incurred? 02/16 - 3/17				
	Las Vegas, NV 89193 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify Judgment				
4.6	Federal Loan Service	Last 4 digits of account number	5FD0	\$1,750.00		
	Nonpriority Creditor's Name PO Box 60610 Harrisburg, PA 17106	When was the debt incurred?	10/16 - 03/17			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify				
		Student Lo	pans			
4.7	Federal Loan Service Nonpriority Creditor's Name	Last 4 digits of account number	5FD0	\$2,742.00		
	PO Box 60610 Harrisburg, PA 17106	When was the debt incurred?	10/16 - 03/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify Student Lo				

Document

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4.8	Future Income Payment, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00	
	18300 Von Karman Ave Suite 410	When was the debt incurred?		
	Irvine, CA 92612 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify NOTICE OF	NLY	
4.9	Navient	Last 4 digits of account number	5617	\$1,736.00
	Nonpriority Creditor's Name PO Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	10/04 - 03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	_	a ciaim:	
	☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐Yes	☐ Other. Specify		
		Student Lo	pans	
4.1)	Navient News in the Condition News	Last 4 digits of account number	8349	\$3,827.00
	Nonpriority Creditor's Name PO Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	10/2002 - 03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

Debtor 1 Eric M. Schickel

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Case number (if know)

Debtor 1 Eric M. Schickel 4.1 **Palos Community Hospital** 1029 \$1,512.00 Last 4 digits of account number Nonpriority Creditor's Name 12251 S. 80th Ave. When was the debt incurred? 05/15 - 03/17 Palos Heights, IL 60463-1256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections 4.1 **Palos Hills Police Department** \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8555 W. 103rd Street Palos Hills, IL 60465 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.1 PLS Pay Day Loan Store 6210 \$306.00 Last 4 digits of account number Nonpriority Creditor's Name 3175 W 175th St When was the debt incurred? 03/17 Hazel Crest, IL 60429 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections

Document

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Synchrony Bank	Last 4 digits of account number	6896	\$2,989.00
Nonpriority Creditor's Name PO Box 5937	When was the debt incurred? 02/16 - 03/17		
Bridgewater, NJ 08807-5937			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collections	3	
US Bank	Last 4 digits of account number	1046	\$2,994.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 5229	When was the debt incurred?	01/12 - 03/17	
Cincinnati, OH 45201-5229			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	■ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	■ Other Specify Collections	<u> </u>	
USAA Federal Savings	Last 4 digits of account number	4952	\$38,617.00
Nonpriority Creditor's Name	_		
9800 Fredericksburg Rd. San Antonio, TX 78288-0001	When was the debt incurred?	0614 - 03/17	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Auto Defici	iency	

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Case number (if know)

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4.1 Vigo County Courthouse 6001 \$957.00 Last 4 digits of account number Nonpriority Creditor's Name 43 S. 33rd Street 2011 - 03/17 When was the debt incurred? Terre Haute, IN 47807 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Judgment** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt and Gaines, P.C. Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankrupty Department** ■ Part 2: Creditors with Nonpriority Unsecured Claims 661 N. Glenn Ave. Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt and Gaines, P.C. Line **4.5** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankrupty Department** Part 2: Creditors with Nonpriority Unsecured Claims 661 N. Glenn Ave. Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital 1 Bank Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital One Bank Usa Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capital One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank, N.A. Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272-1083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GC Services** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Collection Agency Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 1389 Copperas Cove, TX 76522-5389 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Halsted Financial Services** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 828 ■ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Eric M. Schickel

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Skokie, IL 60076	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
ITx Healthcare, LLC	Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
PO Box 360		Part 2: Creditors with Nonpriority Unsecured Claims
Findlay, OH 45839-0360	Look 4 digits of appoint number	
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
Midland Funding LLC	Line 4.14 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
2365 Northside Dr., Ste. 30 San Diego, CA 92108		Part 2: Creditors with Nonpriority Unsecured Claims
San Diego, GA 32100	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Midland Funding LLC	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2365 Northside Dr., Ste. 30		■ Part 2: Creditors with Nonpriority Unsecured Claims
San Diego, CA 92108	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Northwest Colletors, Inc.	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
3601 Algonquin Road		■ Part 2: Creditors with Nonpriority Unsecured Claims
Suite 232		
Rolling Meadows, IL 60008	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Penn Credit	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
916 S. 14th St.		☐ Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 988 Harrisburg, PA 17108		
Tiallissuig, FA 17100	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Portfolio Recovery Associates	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
120 Corporate Blvd., Ste. 100 Norfolk, VA 23502		Part 2: Creditors with Nonpriority Unsecured Claims
1401101R, VA 23302	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
US Bank	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
425 Walnut St.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati, OH 45202	Last 4 digits of account number	
Name and Address US Bank	On which entry in Part 1 or Part 2 did y Line 4.15 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1200 Energy Park Drive	Line 4.13 of (Check one).	
Saint Paul, MN 55108		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
US Bank	Line 4.15 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
CB Disputes		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 108		
Saint Louis, MO 63166	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				-	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	288.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00

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Case number (if know)

Debtor 1 Eric M. Schickel Other. Add all other priority unsecured claims. Write that amount here. 6d. 6d. 0.00 288.00 Total Priority. Add lines 6a through 6d. 6e. **Total Claim** 6f. Student loans 6f. 19,712.00 Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 58,633.00 Total Nonpriority. Add lines 6f through 6i. 78,345.00 6j. 6j.

Page 28 of 55 Document Fill in this information to identify your case: Debtor 1 Eric M. Schickel First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 TMG Management
2638 N. Halsted Street
Chicago, IL 60614

State what the contract or lease is for
Term of Lease: Yearly
Expires: 03/18

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Fill in th	nis information to identify your			
Debtor 1	Eric M. Schickel			\neg
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	, ,			
Case nu (if known)	ımber			☐ Check if this is an
				amended filing
∩ffi⊲i	al Form 106H			
		ahtara		4044=
scne	edule H: Your Cod	eptors		12/15
eople a	are filing together, both are equ	ally responsible for supp boxes on the left. Attach	ts you may have. Be as complete and acc lying correct information. If more space the Additional Page to this page. On the	is needed, copy the Additional Page,
1. D	Oo you have any codebtors? (If	you are filing a joint case, o	do not list either spouse as a codebtor.	
	No			
Y	'es			
			operty state or territory? (Community properto Rico, Texas, Washington, and Wiscons	
	la Catalina 2			
	No. Go to line 3. 'es. Did your spouse, former spo	use. or legal equivalent live	with you at the time?	
		, 9	, ,	
in li For	ine 2 again as a codebtor only i	if that person is a guaran	spouse as a codebtor if your spouse is f tor or cosigner. Make sure you have liste ule G (Official Form 106G). Use Schedule	d the creditor on Schedule D (Officia
	Column 1: Your codebtor			creditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code	Check all sched	dules that apply:
2.4	Harald Cabiakal			N P
3.1	Harold Schickel 9211 Hartsaw St.		☐ Schedule [
	Evansville, IN 47725		■ Schedule B	E/F, line 4.16
	Dad		USAA Federa	
3.2	Harold Schickel		☐ Schedule [
	Unknown Dad			F/F, line 4.9
			☐ Schedule C Navient	i
			_	
3.3	Harold Schickel Unknown		☐ Schedule [
	Dad			F/F, line 4.10
			☐ Schedule © Navient	·

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Fill	in this information	to identify your ca	ase:							
Del	btor 1	Eric M. Schi	ckel			_				
	btor 2 buse, if filing)					_				
Uni	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	T OF ILLINOIS						
	se number							d filing ent show	wing postpetitior e following date:	
0	fficial Form	106I					MM / DD/ Y	YYY		
S	chedule I:	Your Inc	ome							12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not includ	spouse i de infori	s liv nati	ing with you, inclu on about your spo	ude info use. If	ormation about more space is	t your needed,
1.	Fill in your emplinformation.	loyment		Debtor 1			Debtor 2	or nor	n-filing spouse	
	If you have more		Employment status	☐ Employed			☐ Emplo	☐ Employed		
	attach a separate information abou		_mproyment otatae	■ Not employed			☐ Not e	mploye	d	
	employers.		Occupation	VA Disability						
	Include part-time self-employed wo		Employer's name							
	Occupation may or homemaker, if		Employer's address							
			How long employed th	nere?						
Pai	rt 2: Give De	etails About Mor	nthly Income							
spoi	use unless you are	separated.	ate you file this form. If you	Č	•	•		•	·	Ū
nor	e space, attach a s	eparate sheet to	this form.							
							For Debtor 1		Debtor 2 or filing spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$	0.00	\$	N/A	-
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

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Debtor 1 Eric M. Schickel Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 \$ N/A List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 0.00 N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 N/A Insurance 5e. 5e. 0.00 N/A 5f. **Domestic support obligations** 5f. 0.00 N/A 5q. **Union dues** 5q. 0.00 N/A 5h. Other deductions. Specify: 5h.+ 0.00 N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 N/A Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 0.00 N/A List all other income regularly received: Net income from rental property and from operating a business, Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 N/A 8h Interest and dividends 8b. 0.00 N/A Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 N/A 8d. **Unemployment compensation** 8d. 0.00 N/A 8e. **Social Security** 8e. 0.00 N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. N/A Specify: **VA Disability** 1,471.00 8g. 8g. Pension or retirement income \$ \$ 0.00 N/A Other monthly income. Specify: 8h.+ \$ \$ 8h. 0.00 N/A Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 N/A 1.471.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 1,471.00 N/A \$ 1,471.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 1,471.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

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Fill in this inforr	nation to identify y	our case:								
Debtor 1	Eric M. Schi	ickel		Check if this is:						
Debtor 2 (Spouse, if filing)						 ☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date: 				
United States Ba	nkruptcy Court for the	e: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY				
Case number (If known)										
	orm 106J									
	e J: Your			o filipa to acthor bot	h ava av	ually raananaihla fa	12			
information. If		eded, atta	. If two married people ar ach another sheet to this							
<u> </u>	scribe Your House		····							
	oint case?	enoiu								
■ No. Go		in a conor	rata haysahald?							
	oes Debtor 2 live No	ın a separ	rate nousenoid?							
		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate Househ	old of Del	btor 2.				
2. Do you ha	ave dependents?	■ No								
Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?			
Do not sta							□ No			
dependen	ts names.						☐ Yes ☐ No			
							☐ No ☐ Yes			
				-			□ No			
							☐ Yes			
							□ No			
							☐ Yes			
expenses	expenses include s of people other t and your depende	than	l No l Yes							
	imate Your Ongo									
	of a date after the		uptcy filing date unless y sy is filed. If this is a supp							
	ıch assistance ar		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses			
	I or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4.	\$	970.00			
If not incl	uded in line 4:									
	al estate taxes				4a.	·	0.00			
	perty, homeowner				4b.		0.00			
	ne maintenance, r	•			4c.		0.00			
4d. Hor	neowner's associa	ition or con	aominium dues		4d.	Ф	0.00			

0.00

Additional mortgage payments for your residence, such as home equity loans

Debtor 1	Eric M. Schickel	Case num	ber (if known)	
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	80.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d.	Other. Specify:	6d.	\$	0.00
. Foo	d and housekeeping supplies		\$	400.00
. Chi	dcare and children's education costs	8.	\$	0.00
. Clo	thing, laundry, and dry cleaning	9.	\$	150.00
	sonal care products and services	10.	\$	100.00
1. Me d	lical and dental expenses	11.	\$	54.00
2. Tra	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	250.00
3. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
1. Cha	ritable contributions and religious donations	14.	\$	0.00
5. Ins i	rance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	·	0.00
	Health insurance	15b.		0.00
15c	Vehicle insurance	15c.	\$	0.00
15d	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
	allment or lease payments:			
	. Car payments for Vehicle 1	17a.	· -	0.00
	Car payments for Vehicle 2	17b.	· -	0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	10	c	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	er payments you make to support others who do not live with you.	40	\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Scheo Mortgages on other property	20a.		0.00
	Real estate taxes	20a. 20b.		0.00
		20b. 20c.	·	0.00
	Property, homeowner's, or renter's insurance		·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
1. Oth	er: Specify:	21.	+\$	0.00
2. Cal	culate your monthly expenses			
	Add lines 4 through 21.		\$	2,254.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2 254 00
220	Aud into 22a and 22b. The result is your monthly expenses.		Ψ	2,254.00
3. Cal	culate your monthly net income.			
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,471.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,254.00
				·
23c	Subtract your monthly expenses from your monthly income.			702.00
	The result is your monthly net income.	23c.	\$	-783.00
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your iffication to the terms of your mortgage?			e or decrease because of a
	No.			
Π,				

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Fill in this informa	ation to identify your	case:			
Debtor 1	Eric M. Schickel				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
, , , , ,					
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form					
Declaration	on About a	n Individual	Debtor's Sch	edules	12/15
If two married peo	ple are filing together	, both are equally respo	nsible for supplying correc	t information.	
Vou must file this	form whonover you fi	la hankruntav aahadula	a ar amandad sahadulas M	lakina a falaa atatam	ant conceding property or
					ent, concealing property, or or imprisonment for up to 20
	U.S.C. §§ 152, 1341, 1		,		
Sign I	Below				
Did you pay	or agree to pay some	one who is NOT an atto	rney to help you fill out ban	kruptcy forms?	
Dia you pay	or agree to pay come		moy to notp you im out buil	mapley former	
■ No					
— Vaa Na	uma of naroan			Attach Danke	untour Potition Proporario Notice
☐ Yes. Na	me of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
				200.0.0.0.0.0.0	o.ga.a. (oo.a. : o : : o,
	y of perjury, I declare true and correct.	that I have read the sum	nmary and schedules filed w	vith this declaration	and
X /s/ Eric N	M. Schickel		X		
Eric M. S	Schickel		Signature of De	ebtor 2	
Signature	of Debtor 1				

Date

Date March 29, 2017

Fill	in this infor	mation to identify you	r case:			
Del	btor 1	Eric M. Schickel				
		First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	se number					
	nown)				-	Check if this is an
						amended filing
Of	ficial Fo	orm 107				
St	atemen	t of Financial	Affairs for Indivi	duals Filing for E	Bankruptcy	4/16
					equally responsible for sup	unlying correct
					y additional pages, write yo	
nun	nber (if knov	vn). Answer every que	stion.			
Pai	rt 1: Give	Details About Your Ma	arital Status and Where You	u Lived Before		
			2			
1.	wnat is yo	ur current marital statu	IS?			
	☐ Marrie	d				
	■ Not ma	arried				
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	.					
	■ No	:	in and in the least Once on Dece			
	☐ Yes. L	ist all of the places you i	ived in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
	With the diese	l10 #.l				2 (0
s. state					nity property state or territor ico, Texas, Washington and V	
	_				-	
	■ No			W: : E		
	☐ Yes. M	lake sure you fill out Sci	hedule H: Your Codebtors (C	official Form 106H).		
Pai	rt 2 Expla	ain the Sources of You	r Income			
4.				ng a business during this y all businesses, including part	ear or the two previous cale	ndar years?
				e together, list it only once u		
	П №					
		::::::::::::::::::::::::::::::::::::::				
	■ Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until ed for bankruptcy:	■ Wages, commissions,	\$0.00	☐ Wages, commissions, bonuses, tips	
	,		bonuses, tips		_	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Eric M. Schickel

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Case number (if known)

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$20,406.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$7,312.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
winnings. If you are filing a joint cas List each source and the gross inco No Yes. Fill in the details.	ome from each source separa	_	hat you listed in line 4.	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	VA Disability	\$6,900.00		
Dont 2: List Contain Douments Vou	Mada Dafara Vari Filad for	Dankenntar		
Part 3: List Certain Payments You	Made Before You Filed for	Бапкгиртсу		
	's debts primarily consumer Debtor 2 has primarily consustoners Opersonal, family, or househole	ımer debts. Consumer debt	s are defined in 11 U.S.C. §	101(8) as "incurred by an
During the 90 days befo ☐ No. Go to line 7	ore you filed for bankruptcy, di	d you pay any creditor a tota	I of \$6,425* or more?	
☐ Yes List below e paid that cr	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig		
	t on 4/01/19 and every 3 years		or after the date of adjustme	ent.
Yes. Debtor 1 or Debtor 2 o During the 90 days before	or both have primarily consure you filed for bankruptcy, di		I of \$600 or more?	
No. Go to line 7	.			
	each creditor to whom you pai rments for domestic support o			
attorney for	this bankruptcy case.			

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Debtor 1 Eric M. Schickel

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Case number (if known)

7.	Within 1 year before you filed for bankruptul Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. ■ No □ Yes. List all payments to an insider.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which you	ou are a genera iny managing a	al partner; corporations gent, including one for
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	morael e name and nad occ	Dates of payment	paid	still owe	11000011101	ano paymont
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No		nents or transfer a	ny property on a	eccount of a de	ebt that benefited an
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Peason for	this payment
	insider 5 Name and Address	Dates of payment	paid	still owe	Include cred	
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in any cases, small claims actions	y lawsuit, court act , divorces, collection	t ion, or administ n suits, paternity a	rative proceed actions, suppor	ling? t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Midland Funding, LLC v Eric M. Schickel 17 M1 104784	Collection	Cook County, I	L	■ Pending □ On appe □ Conclude	al
	Capital One Bank vs Eric Schnickel 17 m1 100847	Collection	Cook County, I	L	■ Pending □ On appe □ Conclud	al
	Capital One Bank vs Eric Schickel 17 m5 1595	Collection	Cook County, I	L	■ Pending □ On appe □ Conclud	al
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garnis	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
	Mercury Finance Co. 200 Cobb Parkway Suite 42B Marietta, GA 30062-3585	Explain what happened 2015 Ford Explorer ■ Property was repossed □ Property was foreclosed □ Property was garnished	ssed. ed.	02/1	6	\$0.00
		☐ Property was attached	I, seized or levied.			

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Case 17-09821 Page 38 of 55 Case number (if known) Document Debtor 1 Eric M. Schickel 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Attorney Fees** 3/1/17 \$865.00 David M. Siegel & Associates 790 Chaddick Drive

Wheeling, IL 60090

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Debtor 1 Eric M. Schickel

17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo	ors or to make payment			r transfer any propei	rty to anyone who
	■ No					
	Yes. Fill in the details.	December 1			D-(A
	Person Who Was Paid Address	transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial aff ade as security (such as	airs? the granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer			any property or received or debts change	Date transfer was made
	Bona Fide Purchaser 1850 W. Oakbrook Dr. Terre Haute, IN 47802-7801	Lost around \$1 mostly in closi				05/2013
	Unknown					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a s	elf-settled tru	ıst or similar device o	of which you are a
	Name of trust	Description and	value of the prope	erty transferro	ed	Date Transfer was made
Par	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Stor	rage Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, whouses, pension funds, cooperatives, asso No Yes, Fill in the details.	or other financial accou	nts; certificates o	of deposit; sh		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accouninstrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, any	safe deposit	box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the (contents	Do you still have it?

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Debtor 1 Eric M. Schickel

22.	Have you stored property in a storage unit or pla	ce other than your home within 1	year before you filed for bankruptcy?	•	
	■ No				
	Yes. Fill in the details.			_	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
Par	9: Identify Property You Hold or Control for S	omeone Else			
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust	
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	10: Give Details About Environmental Information	tion			
For	he purpose of Part 10, the following definitions a	ipply:			
	Environmental law means any federal, state, or le toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub-	r, land, soil, surface water, ground stances, wastes, or material.	dwater, or other medium, including sta	atutes or	
_	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.				
	<i>Hazardous material</i> means anything an environn hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic s	ubstance,	
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of wher	n they occurred.		
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any r	elease of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ronmental law? Include settlements a	nd orders.	
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	11: Give Details About Your Business or Conn	ections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have an	y of the following connections to any	business?	
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity,	either full-time or part-time		
	☐ A member of a limited liability company ((LLC) or limited liability partnersh	ip (LLP)		
Offici	I Form 107 Statement of	Financial Affairs for Individuals Filing	for Bankruptov	anea	

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Debt	tor 1	Eric M. Schickel	Document	Page 41 of 5	5 ase number (if known)	
		☐ A partner in a partnership ☐ An officer, director, or managing exc ☐ An owner of at least 5% of the voting No. None of the above applies. Go to P	g or equity securities of	of a corporation		
28.	Bus Add (Num	Yes. Check all that apply above and fill iness Name lress ther, Street, City, State and ZIP Code) in 2 years before you filed for bankrupte tutions, creditors, or other parties.	Describe the nature of Name of accountant	of the business or bookkeeper	Employer Identification number Do not include Social Security num Dates business existed Inyone about your business? Include a	
	Nam Add	No Yes. Fill in the details below. ne Iress Iber, Street, City, State and ZIP Code)	Date Issued			
I have are trivith 18 U. /s/ E Erice Sign	e rearue a a bai S.C. Eric	Sign Below Ind the answers on this Statement of Fin and correct. I understand that making a substruction of the statement of Signature of the statement of the	false statement, conc \$250,000, or imprison Signature of	ealing property, or o ment for up to 20 ye	obtaining money or property by fraud i	
Date	• N	larch 29, 2017	Date			

☐ Yes

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Eric M. Schickel			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an
				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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		•	Document 1 age 43 of 33	
Debt	tor 1 Eric M. Se	chickel	Case number (if k	rnown)
na	ame:		☐ Retain the property and redeem it.	☐ Yes
De	escription of		☐ Retain the property and enter into a Reaffirmation Agreement.	
pr	operty		Retain the property and [explain]:	
se	ecuring debt:			
Part	2. List Your U	nexpired Personal Property Lea	ases	
For a	ny unexpired per information belo	rsonal property lease that you l ow. Do not list real estate lease	isted in Schedule G: Executory Contracts and Unexes. Unexpired leases are leases that are still in effective if the trustee does not assume it. 11 U.S.C. § 369	et; the lease period has not yet ended.
Desc	cribe your unexp	ired personal property leases		Will the lease be assumed?
Less	or's name:	TMG Management		□ No
				■ Yes
	cription of leased erty:	Term of Lease: Yearly Expires: 03/18		
Part	3: Sign Below			
		ury, I declare that I have indicate ct to an unexpired lease.	ed my intention about any property of my estate that	at secures a debt and any personal
Х	/s/ Eric M. Schi	ickel	X	
-	Eric M. Schick	el	Signature of Debtor 2	
	Signature of Debt	tor 1		

Date

Date

March 29, 2017

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	_
\$75	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Document

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-09821 Doc 1 Filed 03/29/17 Entered 03/29/17 08:05:15 Desc Main Document Page 48 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Eric M. Schickel		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	865.00
	Prior to the filing of this statement I have received		\$	865.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to agreements and applications as needed avoidance of liens on household goods 	tement of affairs and plan which fors and confirmation hearing, and reduce to market value; exe d; preparation and filing of n	may be required; d any adjourned hear mption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di cases), or any other adversary proceed	schargeability actions, judio		es (except in Chapter 13
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of arbankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
_	March 29, 2017 Date	/s/ David M. Siege David M. Siegel	l	

Signature of Attorney

790 Chaddick Drive Wheeling, IL 60090 (847) 520-8100 Name of law firm

David M. Siegel & Associates

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

H.

Date: 2/13/19

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ 1700.

opportunity to ask questions regarding this agreeme	ent, is satisfied with it, and accepts it in its entirety.
Date: 2.13.2017	Signed:
	Print: ERIC SCHICKEL
Date:	Signed:
	Print:

Signed:

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

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United States Bankruptcy Court Northern District of Illinois

Note that it District of Immors				
In re	Eric M. Schickel		Case No.	
		Debtor(s)	Chapter 7	
	VE	ERIFICATION OF CREDITOR N	MATRIX	
		Number of	f Creditors:	33
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	itors is true and correct to	the best of my
Date:	March 29, 2017	/s/ Eric M. Schickel Eric M. Schickel		

AES/FRN SLT PO Box 61047 Harrisburg, PA 17106

Blitt and Gaines, P.C. Bankrupty Department 661 N. Glenn Ave. Wheeling, IL 60090

Cap One
Bankruptcy Dept.
PO Box 30285
Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130-0281

Capital One Bank Usa 15000 Capital One Dr Richmond, VA 23238

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Cash Flow Group 12333 NW 18th St. #3 Pembroke Pines, FL 33026

Cook County Department of Revenue Non-Retailer Use Tax 26335 Network Place Chicago, IL 60673-1263

Credit One Bankrupcty Department PO Box 98873 Las Vegas, NV 89193 Federal Loan Service PO Box 60610 Harrisburg, PA 17106

Future Income Payment, LLC 18300 Von Karman Ave Suite 410 Irvine, CA 92612

GC Services Collection Agency Dept. PO Box 1389 Copperas Cove, TX 76522-5389

Halsted Financial Services PO Box 828 Skokie, IL 60076

Harold Schickel 9211 Hartsaw St. Evansville, IN 47725

Harold Schickel Unknown

ITx Healthcare, LLC PO Box 360 Findlay, OH 45839-0360

Marla O'Brien Unknown

Midland Funding LLC 2365 Northside Dr., Ste. 30 San Diego, CA 92108

Navient PO Box 9655 Wilkes Barre, PA 18773

Northwest Colletors, Inc. 3601 Algonquin Road Suite 232 Rolling Meadows, IL 60008

Palos Community Hospital 12251 S. 80th Ave. Palos Heights, IL 60463-1256

Palos Hills Police Department 8555 W. 103rd Street Palos Hills, IL 60465

Penn Credit 916 S. 14th St. PO Box 988 Harrisburg, PA 17108

PLS Pay Day Loan Store 3175 W 175th St Hazel Crest, IL 60429

Portfolio Recovery Associates 120 Corporate Blvd., Ste. 100 Norfolk, VA 23502

Synchrony Bank PO Box 5937 Bridgewater, NJ 08807-5937

US Bank Attn: Bankruptcy Dept PO Box 5229 Cincinnati, OH 45201-5229

US Bank 425 Walnut St. Cincinnati, OH 45202

US Bank CB Disputes PO Box 108 Saint Louis, MO 63166

US Bank 1200 Energy Park Drive Saint Paul, MN 55108 USAA Federal Savings 9800 Fredericksburg Rd. San Antonio, TX 78288-0001

Vigo County Courthouse 43 S. 33rd Street Terre Haute, IN 47807